

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SM	3	5/25/02
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		71435	5/31/02
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral) ... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date									
Final	5	8	3	4	12					
Original	1	2	3	4	5					
1	✓	✓	✓	✓	✓					
2	✓	✓	✓	✓	✓					
3	✓	✓	✓	✓	✓					
4	✓	✓	✓	✓	✓					
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If more than 150 claims or 10 actions  
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